Case 15-00055 Doc 5-2 Filed 01/02/15 Entered 01/02/15 18:13:30 Desc Schedule F Page 1 of 2

B 6F (Official Form 6F) (12/07)

In re_	Robert N Flubacker	9	Case No.	
_	Debtor	*	(if known)	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY CREDITOR'S NAME. DATE CLAIM WAS AMOUNT OF UNLIQUIDATED CONTINGENT **MAILING ADDRESS** CODEBTOR **INCURRED AND CLAIM** DISPUTED INCLUDING ZIP CODE, CONSIDERATION FOR AND ACCOUNT NUMBER CLAIM. (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. ACCOUNT NO. XXXX Revolving Credit CAPITAL ONE BANK USA N 3.229.00 PO BOX 30281 SALT LAKE CITY, UT 84130 ACCOUNT NO. XXXX Revolving Credit CAPITAL ONE BANK USA N 13,170.00 PO BOX 30281 SALT LAKE CITY, UT 84130 ACCOUNT NO. XXXX Revolving Credit CAPITAL ONE BANK USA N 3,012.00 PO BOX 30281 SALT LAKE CITY, UT 84130 ACCOUNT NO. XXXX Revolving Credit AMERICAN EXPRESS 243.00 PO BOX 981537 EL PASO, TX 79998 19,654.00 Subtotal> \$ \$ continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical

Summary of Certain Liabilities and Related Data.)

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B 6F (Official Form 6F) (12/07) - Cont.

In re Robert N Flubacker ,	Case No.
Debtor	(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED		IOUNT OF CLAIM
ACCOUNT NO. XXXX			Revolving Credit					-e-good yan darka da kata da k
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ACCOUNT NO.			Cosign Auto Loan					
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ACCOUNT NO.				saananooloojalaaloksud kuu kakka kanammaka maananooloojakana	THE STATE OF THE S			110301-015550 (1504) (1504) (1504) (1504) (1504)
ACCOUNT NO.				Add (100 Add 100 massed data)				MCCOMMANDE OF THE STATE OF THE
				Assault in grant and assault a				
Sheet no of continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							\$	17,727.00
Total ➤ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							\$	37,381.00